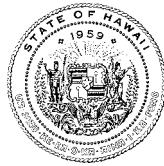


# **2003 ANNUAL REPORT**



## **Executive Office on Aging**



*"E Loa Ke Ola"  
May Life Be Long*

Executive Office on Aging ■ Department of Health ■ State of Hawaii ■ October 2003

250 South Hotel Street, Suite 406 ■ Honolulu, Hawaii 96813

(808) 586-0100 ■ [www2.hawaii.gov/eoa](http://www2.hawaii.gov/eoa)

### **Description of EOA's Logo:**

*"E Loa Ke Ola" – May Life Be Long*

*Aloha and interdependence, a blend of Polynesian, Oriental and Western cultures...this is the visual message of the logo used by the Executive Office on Aging. The logo was created for and adopted by the Hawaii State Commission on Aging in 1974. In 1977, the Executive Office on Aging replaced the Hawaii State Commission on Aging.*

*The traditional Chinese ideograph for longevity translates, "The scholar struggles with his long hand continuously so that there will be food to feed every inch of his mouth."*

*Scholar-artist Hon-Chew styled the Chinese character for longevity to create a Hawaiian petroglyph symbol expressing Mary Kawena Pukui's translation of the Hawaiian words "E LOA KE OLA – May Life Be Long." The logo shows the family working together to "feed every inch of the mouth." The father of the family is depicted as tilling the land, while the mother is catching fish under water, and their son is spearing animals.*

*The expression of aging, island style, is a natural and welcome process with deep, joyous meaning to individuals and their families and communities. The logo symbolizes the desire of the people of Hawaii to be blessed with long and fulfilling lives.*

## PREFACE



In State fiscal year 2003, Hawaii's aging programs served Hawaii's 60+ population and funded activities for family and individual caregivers. Knowledgeable answers and good information that link people with resources consistently top the needs expressed by Hawaii's communities.

A diverse cultural and ethnic heritage, unique Island environments, and genuine aloha characterize the aging experience in Hawaii. Our Federal, State, and County governments, businesses, non-profit agencies, and communities exemplify a common commitment to caring about the way we all age in Hawaii.

The Executive Office on Aging leads a network of County area agencies on aging in applying ingenuity and hard work to focus and engage the larger community on multiple issues, problem-solving, and resource sharing that ultimately enrich our individual and collective aging experiences.

A very sincere mahalo e aloha nui loa to all in our Island State for contributing in many ways to enriching the lives of our older adults.

A handwritten signature in black ink, appearing to read 'Pat A. Sasaki'.

PAT A. SASAKI  
Executive Director

## MESSAGE FROM THE GOVERNOR



I am pleased to present the 2003 Annual Report of the Executive Office on Aging. The report is a summary of the major plans, programs, projects, and activities conducted on behalf of Hawaii's older adults.

Hawaii's na kupuna (elders) are fortunate to have a long life. They are living longer and longer. As a population cohort, they have diverse issues, concerns, and perspectives. This report summarizes the work of the many accomplishments of the Policy Advisory Board for Elder Affairs, Area Agencies on Aging, and individuals and communities in working together with the Executive Office on Aging to improve the lives of older adults in Hawaii.

E loa ke ola – may life be long.

A handwritten signature in blue ink, which appears to read "Linda Lingle". The signature is fluid and cursive.

LINDA LINGLE  
Governor

## MESSAGE FROM THE DIRECTOR OF HEALTH



I take great pleasure in presenting the 2003 Annual Report of the Department of Health Executive Office on Aging. Chapter 349, Hawaii Revised Statutes relating to the Executive Office on Aging, was revised during the 2003 legislative session to codify the attachment of the Office to the Department of Health for administrative purposes. The Executive Office on Aging continues its commitment to assuring opportunities for Hawaii's people to attain and enjoy healthy, dignified and independent lives.

It is the Department's vision to ensure healthy people, healthy communities, and healthy Islands. We are drawing upon the finest minds and resources available to us today in order to achieve this vision. We are also counting upon the will and ability of Hawaii's people to join in this endeavor.

Physical, mental, and spiritual health fuel the essence of Hawaii's people. Making good and wise choices about our lifestyles remain the greatest way towards healthy and independent living and aging in our State of Hawaii.

Aloha Pumehana,

A handwritten signature in dark ink, appearing to read "ChiYome Leina'ala Fukino".

CHIYOME LEINA'ALA FUKINO, M.D.  
Director of Health

## TABLE OF CONTENTS

<b>PREFACE .....</b>	<b>i</b>
<b>MESSAGE FROM THE GOVERNOR .....</b>	<b>ii</b>
<b>MESSAGE FROM THE DIRECTOR OF HEALTH .....</b>	<b>iii</b>
<b>TABLE OF CONTENTS .....</b>	<b>iv</b>
<b>PLANNING AND ADVOCACY .....</b>	<b>1</b>
State and Area Plans on Aging .....	2
Legislation Affecting Older Adults .....	2
<b>AGING PROGRAMS AND SPECIAL PROJECTS .....</b>	<b>4</b>
Federal Older Americans Act Programs .....	4
Long Term Care Ombudsman Program .....	6
Long Term Care Volunteer Ombudsman Program .....	6
Elder Rights .....	7
SageWatch .....	10
Sage PLUS .....	11
Kupuna Care .....	12
Caregivers Resource Initiative Project .....	13
Improving End of Life Care (Kokua Mau) .....	13
SAMS 2000 Implementation .....	14
<b>BUDGET ALLOCATIONS AND TITLE III SERVICES PROFILE .....</b>	<b>16</b>
<b>THE POLICY ADVISORY BOARD FOR ELDER AFFAIRS (PABEA) .....</b>	<b>18</b>
<b>HOW TO REACH THE AGING NETWORK .....</b>	<b>20</b>

## PLANNING AND ADVOCACY

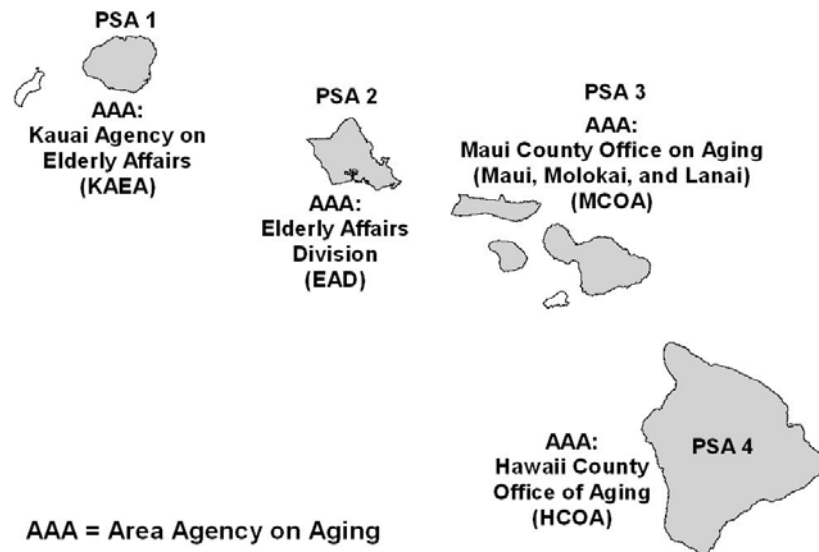
The Older Americans Act (OAA) established the Administration on Aging of the U.S. Department of Health and Human Services to administer OAA programs at the federal level.

In each state there is a designated State Unit on Aging. In Hawaii, the State Unit is the Executive Office on Aging (EOA), an attached agency of the State Department of Health. EOA provides leadership relative to all aging issues on behalf of the 217,000+ individuals 60 and over in Hawaii. EOA is the State agency responsible for coordinating and providing a focus for statewide efforts on behalf of Hawaii's older adults. The mission of EOA is to assure the well-being of Hawaii's older adults by:

- Providing leadership in programs and policies for older adults,
- Serving as a clearinghouse for information, and
- Partnering with the Aging Network to provide home and community-based care for frail, vulnerable older adults.

The 1972 revisions to the OAA allowed states the option of creating substate entities, or Area Agencies on Aging (AAAs), to oversee services in communities. Under the OAA, the EOA divided the State into four Planning and Services Areas (PSAs). PSAs correspond to county boundaries in the State, except in PSA 3 which includes Kalawao County, in addition to Maui County.

### Planning and Service Areas (PSAs)



The Administration on Aging annually determines the level of federal funding allotted to Hawaii. The EOA then distributes those funds to the four AAAs according to a formula approved by the Administration on Aging.

## **I. STATE AND AREA PLANS ON AGING**

### **Hawaii State Plan on Aging**

In order to be eligible for grants from allotments from Titles III and VII of the Older Americans Act, as amended, the Executive Office on Aging is required to submit to the U.S. Administration on Aging a State plan. The State plan is based on the plans of the AAAs.

*Working Together With the AAAs:* In November 2001, EOA brought together representatives from the AAAs to begin a series of planning meetings to prepare for and develop the area and state plans. These meetings were dedicated to information sharing, and reviewing data collection practices and grassroots planning approaches. EOA facilitated dialog with AAA in identifying major issues of Hawaii's aging society. Collectively, a course of action was set for the next four years. EOA and the AAAs agreed to pursue five major goals:

- Older adults make informed decisions through accurate information.
- Older adults are able to live independently in their homes for as long as possible.
- Family caregivers have supportive programs and services that address their needs to enable them to continue giving care.
- Older adults and family members are informed of elder rights and benefits.
- Public and private sectors and the community work together to address existing and emerging issues.

*Local Area Planning:* Once the planning framework was established, the AAAs proceeded to develop their local plans. Each AAA plan incorporated the communities' voices, values, and perspectives. The AAAs held public hearings to enable the public to share their thoughts regarding the proposed local plans.

*State Planning:* EOA and *Plans and Review Committee of PABEA* reviewed and commented on the local AAA plans. The AAA plans served as the basis for the State plan. EOA developed the proposed state plan, sought public comments, and conducted six public hearings across the state to receive testimonies on the proposed plan. The *Plans and Project Committee of PABEA* reviewed the public testimonies and advised EOA on the development of the final plan. EOA completed the plan and submitted it to the U.S. Administration on Aging for approval.

## **II. LEGISLATION AFFECTING OLDER ADULTS**

In 2003, the Hawaii Legislature passed a total of six bills regarding the elderly, including a bill to attach the Executive Office on Aging to the Department of Health for administrative purposes. Governor Lingle has signed into law three health care related bills which are designed to improve the health care available to our elder citizens. Notably, legislation was passed to reform criminal history record checks and create a new civil action remedy for neglect of the elderly.



## **Bills that passed**

### Act 191—Relating to the Medicaid Prescription Drug Expansion Program.

This Act became effective on June 17, 2003. It enables the State of Hawaii to continue to seek approval of a federal waiver to provide for a Medicaid prescription drug expansion program and to extend a sunset date for the program until 2006. The Prescription Drug Roundtable has been convened to review states' programs in this regard.

### Act 196— Relating to Elder Abuse.

This Act was signed into law on June 24, 2003. The enactment will provide tools for government attorneys to deter and punish elder abuse by persons or entities defined as "caregivers." A critical component is to give the Attorney General the power to impose civil fines against elder abuse. In general, it will facilitate civil actions and dramatically improve the ability of the Attorney General to address complaints that do not rise to the level of criminal conduct. Of note is the bill that passed excludes private homes. Private homes do not include commercial operations.

### Act 202 – Relating to Unannounced Visits.

Section 321-15.6, Hawaii Revised Statutes, is amended to require the Department of Health to conduct unannounced visits in adult residential care homes. The frequency of visits is annually, as left to the department's discretion. These visits are to take place in addition to the annual inspections for relicensing.

### Act 204 – Relating to the Executive Office on Aging.

This Act transfers the rights, powers, functions, and duties of the office of the governor, relating to the Executive Office on Aging, to the Department of Health. The bill was enacted out of concerns raised by the Office of the Attorney General that continued placement of the Executive Office on Aging in the Office of the Governor was in violation of a state constitutional provision.

## **Bills that did not pass**

### Senate Bill 882 – Relating to Multipurpose Senior Centers.

This would have required the EOA to assure the continued funding of statewide multipurpose senior centers. The bill failed to move from the Health and Human Services committee.

### Senate Bill 1088 – Relating to Long Term Care Financing.

The long-term care tax was vetoed. This bill had combined the features of a long-term care tax and a tax credit for purchases of long term care insurance.

## **AGING PROGRAMS AND SPECIAL PROJECTS**

In accordance with the mandates of the Older Americans Act, as amended, the Executive Office on Aging is the entity in state government responsible for the administration of a statewide system of social services and programs affecting seniors in Hawaii. It coordinates a comprehensive range of social, health, and long-term care services designed to enhance the independence and self-reliance of persons who are no longer able to care for themselves.

### **I. Federal Older Americans Act Programs**

#### **Supportive Services**

Title III-B, Section 321 of the Older Americans Act authorizes supportive services, which includes access, in-home, and community-based services. Priority is given to older individuals who have the greatest social or economic need or are low-income minority.

Access services are services designed to provide older Americans with the means to receive needed services available in the community. These services include information and assistance (provides individuals with current information on opportunities and services available to them within their communities), outreach (identifies individuals who may require needed services), case management (assesses and determines the types and amounts of services needed), and transportation (provides a means for an older individual to get to the location where services are provided).

In-home services, such as attendant care, homemaker, personal care, and adult day care assist seniors who wish to remain in their homes and communities.

Community services are designed for seniors with the ability to travel to the point of service and participate in senior activities. These services encourage seniors to remain active members of the community.

During FY 2003, Title III-B provided supportive services ranging from transportation (169,277 one-way trips for 4,108 persons) and case management (26,675 hours for 1,922 persons), to personal care (48,312 hours for 787 persons) and chore and homemaker services (21,729 hours for 1,028 persons). The statewide allocation for FY 2003 was \$1,715,581.

#### **Congregate and Home Delivered Meals**

Title III-C of the Older Americans Act authorizes nutrition services to participants attending congregate meal sites and home delivered meals to homebound individuals. Meals provided for both congregate and home delivered meals shall meet the 1/3 R.D.A. and other requirements as specified by the EOA Nutrition Standards, as amended in May 2000.

Title III-C is divided into two subparts: congregate dining (C-1) and home-delivered meals (C-2). During FY 2003, statewide funding for congregate meals was \$1,437,378, and a total of 381,809 meals were provided at congregate dining sites. During the same year, funding for home delivered meals amounted to \$895,875 and this provided a total of 525,064 hot and frozen home delivered meals statewide.

### **Disease Prevention and Health Promotion**

The services authorized under Title III-D, Disease Prevention and Health Promotion, include health fairs, health assessment and screening, which includes vision, hearing and nutrition screenings, health promotion activities such as exercising and range of motion therapy, medication management screening and education, and counseling services. The funding allotment for Title III-D during FY 2003 was \$108,497.

### **National Family Caregiver Support Program**

Section 373 of the Older Americans Act established Title III-E and authorized the National Family Caregiver Support Program to develop a statewide system to integrate the five statutory services under this title.

These five statutory services include:

Information: Group services and public education, which includes the provision of information at health fairs. Outreach is for the purpose of identifying potential caregivers and encouraging them to explore service options.

Assistance: One on one contact either through information and referral or case management.

Counseling: Counseling services encompasses individual counseling, support groups, and caregiver training to assist the caregivers in making decisions and develop problem solving skills.

Respite Care: Service that provides temporary relief from the daily responsibilities of caregiving.

Supplemental Care: Services to support the needs of the caregiver, as defined by the state.

The overall funding allocation for FY 2003 for Title III-E was \$700,790.

### **Legal Assistance**

Congress authorizes legal assistance to be provided under the Older Americans Act through a statewide system of attorneys. The services offered include:

- Advice and representation by qualified attorneys or persons under supervision of an attorney;
- Counseling and other assistance to individuals;
- Information and referral;
- Community education regarding legal and related issues such as benefits and entitlements, wills and trusts, guardianship and powers of attorney.

## **II. LONG TERM CARE OMBUDSMAN AND LONG TERM CARE VOLUNTEER OMBUDSMAN PROGRAM**

### **Long Term Care Ombudsman Program**

Under Title VII of the Older Americans Act, the Long Term Care Ombudsman (LTCO) counsels, advocates, and responds to complaints and problems on behalf of residents of licensed nursing homes, adult residential care homes, expanded adult residential care homes, assisted living facilities and other licensed LTC facilities.

The LTCO works with various organizations and residents to improve the quality of a LTC resident's life by providing information, referrals, and consultation to families, service providers, and the general public on LTC issues; works with licensing, certification, and other enforcement agencies to improve quality of care in LTC facilities; and protects the rights of residents in LTC facilities (i.e. physical abuse, financial issues, restraints, etc.).

In FY 2003, the LTCO Program conducted 154 consultations with LTC facility staff, responded to 855 requests for information and assistance, and presented 53 community education presentations. Program staff responded to 233 complaints made by or on behalf of residents. Eleven in-service meetings were provided to LTC staff, and meetings were held with 17 Resident Councils and 13 Family Councils. The program received \$135,011 in total program funding from state and federal sources in 2003.

To help increase its visibility and provide greater access to LTC residents, a state-supported Long Term Care Ombudsman Volunteer Program was established.

### **Long Term Care Ombudsman Volunteer Program**

Established to help the mission of the LTCO Program, the Long Term Care Ombudsman Volunteer Program trains persons to become certified volunteers in licensed LTC settings, so all residents are aware of the services provided by the LTCO. The focus of the program is to provide culturally sensitive advocacy and referral services to these residents.

In FY 2003, the program has been able to accomplish the following:

- Program policy and procedures (already written) were finalized,

- A Training Manual was updated,
- 73 training sessions (256 hours) were conducted,
- 22 new volunteer ombudsmen were trained, certified and assigned to LTC facilities,
- 3,246 face-to-face visits with residents were made,
- 1,028 hours were spent at facilities,
- 471 facility visits were conducted,
- or an average of 2.18 hours visiting 6.89 residents per visit.

Program staff members speak at various civic club meetings, church groups, AARP chapters, and veterans' clubs to promote program visibility through community outreach. The program has also been featured in the Honolulu Star-Bulletin.

### **III. ELDER RIGHTS**

#### **Elder Abuse Public Awareness Project**

The Executive Office on Aging supports the development of an expanded elder abuse response system. As of July 1, 2003, \$23,666 was committed to edit and televise PSAs, develop radio PSAs, and a resource handbook to address elder abuse in Hawaii, funded by Title VII of the Older Americans Act.

The Awareness Project further identified key elements and service needs for an expanded elder abuse system, including:

1. Community awareness - public information, provider training. Elder abuse education and training, elder abuse information, detection and reporting, laws, services and resources.
2. Community networking - Inter-agency and service resource coordination, multi-discipline consultation.
3. Elder Abuse Service interventions
  - Identification and intake - information and assistance, reporting; screening, early identification, investigation, protective and preventive service interventions.
  - Crisis response - Emergency outreach and management
  - Case management - Assessment, care planning, and management
  - Elder abuse counseling and support
  - Legal and financial counseling

- Caregiver respite and support, Kupuna Care and Area Agency service programs: more respite, in-home and community care services. More caregiver services.
5. System support – refine laws, authority, enforcement; resources and advocacy
  6. Community service resources for elder abuse response

A combination of a coordinated network of existing community service resources, additional capacity, and expansion of (specialized) elder abuse services could optimally serve the complex needs of elder victims, APS gap group victims, and elders at risk of abuse, neglect, or exploitation.

### **Sentinel Program**

Sentinel projects were developed by the National Center on Elder Abuse to reach cases of abuse or neglect that exists in the community by engaging individuals in community agencies who have frequent contact with the elderly. The objective is to discover abuse among the elderly living in the community who are “hidden” and most at risk of abuse.

Sentinel training project trained over 400 Community Sentinels on what is elder abuse, recognizing indicators of elder abuse, and how to make a report. In our communities, there is an increasing awareness that vulnerable older persons are subjected to abuse, neglect and financial exploitation, frequently by their own family members. With predictions that in the next twenty-five years, the elderly population will double, the patterns of abuse, neglect and exploitation will also increase. With the assistance of Adult Protective Services, the Area Agencies on Aging Network, and law enforcement personnel, trainings were held in all counties. State and national studies indicate that for each reported case there are at least 5 and as many as 14 cases that are not reported to authorities.

The information gathered in this project enabled EOA to: 1) recognize the major role of aging network and other community service providers (of social, health, legal, and financial services) in elder abuse prevention and intervention for high risk elders, 2) facilitate coordination and collaboration of community agencies (social services, law enforcement, and criminal justice), 3) augment the APS short-term protective service interventions for dependent adult victims, and 4) forecast the need for greater capacity to serve elder victims, APS gap group elders, and other elders at-risk for abuse, neglect, or exploitation.

The project was supported by 2000-VA-GX-0015, awarded by the Office for Victims of Crime, Office of Justice Programs with state matching funding from the EOA.

A combination of a coordinated network of existing community service resources, additional capacity, and expansion of (specialized) elder abuse services could optimally serve the complex needs of elder victims, APS gap group victims, and elders at risk of abuse, neglect, or exploitation.

## Project REACH

Project R.E.A.C.H. (acronym of “Responsiveness, Encouragement, Assistance through Counseling and Help”) is a state initiative to respond to the problem of elder abuse and neglect in the City and County of Honolulu. Since August 2002, the Project provides care coordination and counseling to older adults, 60 years and older, who are at risk of, or have been physically, psychologically or sexually abused; financially exploited; neglected by others or by one’s self. Project REACH works collaboratively with the aging network, i.e., Executive Office on Aging, community service providers including KUPUNA CARE, Area Agencies on Aging, Adult Protective Services and other community partners in developing a coordinated system.

Conservative national estimates (National Center for Elder Abuse) of abuse range from a low of 5% to a high of 10% of the total elder population. Based on the Census 2000, there are a total of 207,000 individuals aged 60 years and older in Hawaii. Based on the National estimates, at the inception of the Project we were serving less than 1% of those estimated to be at risk of abuse/neglect and in need of assistance.

For the fiscal year, Project REACH provided 3493 service hours. This consisted of information and referral to 222 persons and served 86 elderly clients with specialized services. A total of \$198,000 was allocated to Project REACH for FY 2003.

Service Category	Hours of Services	Persons Served
Information & Referral	408.75	222
Intake & Assessment	214.00	86
Supportive Counseling	379.75	58
Case Management	1,829.75	75
Financial Counseling	128.50	29
Financial Management	344.00	23
Legal Services	188.00	19
Total Hours:		3,493.00

Project REACH receives referrals from State and private agencies and currently provides specialized services to abused, neglected and self-neglected elders. These elders found to be in a high-risk category and in need of specialized services related to their victimization were assisted in prevention of future incidences of abuse and neglect and/or rapid deterioration in their physical and mental health status.

#### **IV. SageWatch**

SageWatch is a volunteer-based program, funded by the federal government, to combat health care fraud by means of a community-wide education effort. Its primary objective is to inform and educate Medicare beneficiaries to detect and/or prevent cases of abuse, fraud, and waste in the Medicare and Medicaid systems, and reduce the amount of monies lost to fraud and abuse. SageWatch incorporates a collaborative effort among community/consumer groups, providers, Medicare contractors, and government agencies.

For FY 2003, the following were the major activities and accomplishments of the program:

From July 2002 to June 2003, a total of 90 presentations, reaching approximately 2,500 individuals, were held statewide (50 on Oahu, 16 in Maui/Lanai, 9 in Hilo, 8 in Kona, and 6 in Kauai). Staff also attended several senior fairs around the state, including the opening of a new senior center on Molokai in February 2003 and the large Senior Fair on Oahu in September 2002 where approximately 20,000 attended. During the year, SageWatch distributed more than 12,500 goody bags, brochures, personal health journals and other materials related to preventing fraud and abuse.

SageWatch and Sage PLUS held the six-week “Navigating the Medicare Maze” course for a second time at the Kaimuki Adult Education School in September. Fifteen students attended the course and completed evaluations. Plans are being made to videotape the course for viewing on cable access television. The course will be offered again this spring at the Kalaheo Adult Educational School.

A total of four volunteer trainings were held, one each on Oahu, Hilo, Kauai and Kona. Several new volunteers have been recruited. The SageWatch Program has 60 volunteers trained to give presentations throughout the state. SageWatch provides ongoing training for all volunteers at quarterly meetings in order to provide them with the most current information about fraud and abuse. Speakers from the SageWatch Advisory Council and others in the community who are involved in fraud prevention regularly speak to the volunteers at the meetings. The program continues to air paid advertisements and public service announcements over KIKU, the multi-ethnic television station in Hawaii. In addition, outreach activities to culturally diverse communities are being continued, e.g. presentations on the Hispanic Radio Program and to the Lanakila Chinese Club. The program has also been invited to a panel on a cable access television program entitled “Medicare and Medicaid Fraud in Hawaii.”

SageWatch also started planning for a conference in October 2003 entitled “The SageWatch Senior Fraud Conference: Expert Advice About Recognizing and Reporting Consumer Fraud” at the Hilton Hawaiian Village, with Honolulu City and County Prosecutor Peter Carlisle planned as the keynote speaker.



## **V. Sage PLUS**

The Sage PLUS Program is a federally funded, state-sponsored program that is designed to give unbiased health insurance information counseling and assistance to people with Medicare at no cost to the individual. The program is currently in its 11<sup>th</sup> year of funding. Sage PLUS stands for, “Sage,” someone who is wise and “PLUS,” is an acronym for (People Learning about and Understanding the System). One of the missions of the Sage PLUS Program is to provide unbiased information to Medicare beneficiaries in the community regarding Medicare, Medigap, Medicaid, Medicare+ Choice, Long Term Care Insurance and community resources to supplement your health insurance. A unique aspect of the Sage PLUS Program is that it uses peer volunteers from the community. Trained Sage PLUS volunteer counselors offer information over the telephone via the Sage PLUS hotline which has a toll free number, through person to person counseling with clients and outreach presentations to community organizations, senior citizen clubs, pre-retiree and other interested groups and also participate in health and senior fairs. Sage PLUS volunteer counselors are located here on Kaua’i as well as on Oahu, Mau’i and in Hilo and Kona on the Big Island.

Highlights for FY 2003 included the following:

Sage PLUS participated in several senior fairs during the year. It not only disseminated information but also presented a break out session on Medicare during the Oahu Caregivers Fair held in July 2002. Approximately 500 people attended. Sage PLUS also participated in the Meals on Wheels Summer Health Fair and provided counseling and information to over 400 clients. The largest senior fair in Hawaii was held on the last weekend of September and this year there were 20,200 attendees. The program also participated for the first time in the Hawaii Hispanic Fair and provided information to over 500 attendees. In November, Sage PLUS participated in the annual senior fairs on the islands of Maui and Kauai, where information was disseminated to approximately 7,000 participants at both fairs. It likewise participated in the first Molokai Senior Fair, held on February 14, 2003. Over 150 participants attended the event. Sage PLUS participated in the AARP Caregiver’s Fair held at Bishop Street in March 2003. This was an effort to reach the downtown working caregivers and approximately 200-300 people attended. This again shows the need for information regarding Medicare, Medicaid and health insurance to be accessible not only to the beneficiaries themselves, but also to their families and caregivers. Sage PLUS was also present at the First Hawaiian Prime Time Fair in April 2003. The fair is the second largest on Oahu and the estimate is approximately 5,000 participants. In June 2003, Sage PLUS participated in community health fairs at the Japanese Chamber of Commerce. Participation was estimated at approximately 350 people.

Sage PLUS also engaged in networking activities with several groups during the year. In partnership with the Sage Watch Program (Fraud, Waste and Abuse), Sage PLUS presented a Medicare 101 class at one of the Adult Education Schools. The class was titled “Navigating the Medicare Maze” and consisted of a six series course: Traditional Medicare, M+C, Hospice, Medicaid, Long Term Care Insurance, Fraud, Waste and

Abuse. Also, partnering with the Pacific Area Representative for CMS, Sage PLUS took the opportunity to visit each Social Security Office in the four counties and the tele-service group and presented how the Hawaii SHIP can assist them. Working with the University of Hawaii Human Resource Department, Sage PLUS did presentations at each of the community colleges and the University of Hawaii Manoa for the staff and pre-retirees. Each of the schools have asked us to schedule additional presentations at their sites, because they feel that working individually with each campus we can increase the attendance. The presentations were on Medicare and Sage PLUS in general, though at each campus the focus turned to long-term care as many of the staff are caregivers to family members. Finally, in partnership with the Department of Human Services, Sage PLUS was listed as a resource for the 92,000 Medicare beneficiaries who received letters regarding the Medicare Savings Program from Social Security from May to December 2002.

Sage PLUS continued the expansion of its volunteer corps during the year. The Office of Hawaiian Affairs' Board of Directors approved the outreach volunteer training project and training was completed in June 2003. Staff attended several conferences: the Annual National SHIP Conference held in Washington D.C. from May 3 –7, 2003, and the Centers for Medicare and Medicaid Services "National Customer Service Conference 2003 – Service First: Catch The Spirit" on June 23-26, 2003 in Scottsdale, Arizona. Staff and volunteers also participated in the Sentinel Training Program for Elder Abuse, held at the University of Hawaii.

## **VI. KUPUNA CARE**

Kupuna Care is a statewide long-term care program that is designed to meet the needs of older adults who cannot live at home without adequate support from family and/or formal services. Kupuna Care provides in-home and community-based services which include adult day care services, assisted transportation, attendant care, case management, chore services, homemaker services, home-delivered meals, and personal care.

Kupuna Care targets older adults having difficulty in performing two or more functions of daily living (ADLs and/or IADLs). To qualify, an individual must be a U.S. citizen or legal alien; 60 years of age or older; not covered by any comparable government or private home- and community-based care services; and not residing in an institution.

State funds cover the cost of services for those who cannot afford to pay and those who can afford to pay only a portion of the service. The co-payment is based on the older adult's monthly net income. Housing costs, out-of-pocket medical expenses, and emergency situations are considerations in determining the older adult's monthly net income.

During the state FY 2003, a total of 9,290 unduplicated clients statewide received Kupuna Care services. A total of \$4,514,843 was allocated for Kupuna Care services for FY 2003.

## **VII. CAREGIVERS RESOURCE INITIATIVE PROJECT**

The Caregivers Resource Initiative project was developed to enhance caregiver support efforts at the local level by partnering and collaborating with various stakeholders in the community statewide. Caregiver support is available to anyone who is providing unpaid assistance to an older adult, 60 years and older, or to any 60+ grandparent who is caring for a dependent grandchild under the age of 18 years.

In FY 2003, the Caregiver Resources Initiative Project developed and distributed quarterly Family Caregiver newsletters to 1,500 families and organizations statewide. The newsletter features personal stories, a caregiver advice column, Neighbor Island reports, public medical information, upcoming events, and support group information.

Work continued on designing a caregiver website that will be integrated with the EOA's website. The caregiver website will offer access to: networking among caregiver families; community resources; programs and services; chat room and bulletin board; links to other helpful websites; one-stop caregiver calendar of community events; frequently asked questions section; reference section; and legislative information.

The Family Caregiver's Network has enlisted 800 members and, through activities like the newsletter, has enabled the EOA to facilitate communication, shared learning, and genuine support among families, professionals and organizations that address the diverse and broad aspects of caregiving on a daily basis.

Increased awareness is improving the focus of research, advocacy, policy development and legislative interests that affect Hawaii's families and their caregiving responsibilities.

## **VIII. IMPROVING END OF LIFE CARE (KOKUA MAU)**

Across almost all cultures it is taboo to talk about death and dying. These taboos create a public and professional culture in which many people die alone, in pain, in unfamiliar institutional settings, and with their families impoverished. This assessment is confirmed by national and local research and led to the creation of the Kokua Mau Coalition ([www.kokuamau.org](http://www.kokuamau.org)) in 1999, of which the EOA continues to be a core member.

Kokua Mau's Vision and the basis for our work continues to be: "to weave a lei of community support so Hawaii's people may die in the place of their choice, free of pain and suffering, and treated according to their beliefs, values and traditions."

The Aging Network has been the focus of Caring Conversations, a program supported by grants from the Archstone and HMSA Foundations. Its goal has been to integrate end-of-life issues into the work already done by the Network, providing training, resources and support to area agencies on aging and service providers. The Program also outreaches nationally, sharing materials and providing training to interested organizations including the New Mexico, Utah and Arizona State Units on Aging, the Administration on Aging,

NASUA, The Centers for Disease Control, the National Association of State Units on Aging and AARP.

The program has been recognized by Harvard University's *Innovations in American Government* competition placing in the top 100 for the second year in a row. Nationally, we have been invited to participate in and present at a variety of conferences including the New Mexico State Conference on Aging (8 workshops), Rallying Points Regional Conference (presentation to 200 professionals involved in end-of-life care), the Centers for Disease Control/Chronic Disease Division (participation in workshop) and the National Association of Attorneys General Listening Conference on End-of-life Issues (Hawaii's representative.) Locally we have made presentations on all islands, including Lanai and Molokai. Additionally we have spoken in rural communities in Hana and presented to Hawaiian kupuna around Oahu in collaboration with Alu Like. We were pleased to present at Care Expo at the Filipino Cultural Center reaching an important audience of Filipino lay and professional caregivers.

*"End-of-life Care: An Aging Network Issue. Advocacy Guide and Resource Kit."* 150 copies of the updated 2002 version have been distributed around the country as well as locally, offering organizations hands-on, practical tips for integrating end-of-life issues in their work or helping end-of-life organizations understand the opportunities for collaboration with the Aging Network. Locally the brochure "Making End-of-life Decisions" has been well received as it offers explanations of terms and procedures commonly encountered as people approach the end of their lives. 8000 copies have been distributed. The video "Breaking the Ice: Stories on End-of-life Issues" continues to be distributed around the state and across the country. Clips of the video were used to create non-commercial service announcements and through a collaborative effort with the Hawaii Broadcasters Association.

Although funding for the program will end in October 2003, EOA will continue to provide materials and collaborate with community efforts of Kokua Mau to improve care at the end of life. These efforts help not only the older adults that we serve but their families and caregivers as well.

## **IX. SAMS 2000 IMPLEMENTATION**

The Executive Office on Aging is accountable for federal and state dollars received for services and programs serving adults 60 years and older. The four county office Area Agencies on Aging and the EOA have selected the software known as SAMS 2000 (Social Assistance Management Services) to track the clients' demographic information and service utilization data. The following activities were undertaken in 2003 toward SAMS 2000 implementation.

Each AAA designated a SAMS administrator for the development and implementation of SAMS 2000 in their respective AAA. Meetings were held at the Executive Office on Aging to familiarize Administrators with the capabilities, set up and use of the SAMS

software. After establishing common SAMS structural arrangements and relational links, each administrator was responsible for installing the SAMS software as a stand alone or on a network server in their county. Three of the four AAA have successfully installed SAMS 2000; and training was provided for their staff and service providers. Horace Farr from the Hawaii County Office on Aging performed training on the SAMS 2000 system. The fourth AAA plans to have SAMS 2000 installed on all service providers' computers before the end of September.

All four AAA are at different stages of data management. Entering and cleaning up the existing client data is a priority for a number of AAA. The Kauai Agency on Elderly Affairs is starting fresh by entering all client demographic information and current service utilization data into the SAMS 2000 database. Honolulu's Elderly Affairs Division plans to start inputting data into SAMS 2000 as early as October 1, 2003 (beginning of a new federal fiscal year). The Maui County Office on Aging is currently entering data for FY 2003. The Hawaii County Office of Aging has a year of data entry experience behind them and has begun capturing performance outcome measures using the SAMS 2000 system. All four county office Area Agencies on Aging plan to produce their FY 2004 annual report with SAMS 2000.

One AAA has taken advantage of the Synergy Suite products and has installed and operates all four modules: information and assistance module (BEACON I&R); case management module (OMNIA); client tracking and service utilization module (SAMS); and financial module (FIN PAK). The Hawaii County Office of Aging has also deployed and implemented remote web-based access to its SAMS 2000 database system using the Internet. The Maui County Office on Aging has begun plans to implement SAMScan, an automatic scanning device offered by Synergy Technologies, to assist nutrition programs with their data collection and reporting.

One of the AAA directors has acknowledged the need for remote web-based access to the SAMS 2000 database using the Internet and has raised the possibility of HCOA hosting data from other AAA in its existing Citrix server or EOA installing and operating a centralized system with remote web-based technology.

## BUDGET ALLOCATIONS AND TITLE III SERVICES PROFILE

Support for EOA programs and services are provided by funds allocated from federal, state, and private sources. For FY 2003, the EOA received a total of \$13.3 million in budget allocations: \$7.4 million from the Federal government, \$5.85 million from the state, and \$47,558 from private funding agencies. A comparative breakdown of EOA funding allocations for FY 2002 and FY 2003 is shown below:

### EOA FUNDING ALLOCATIONS

Source	FY 2002	%	FY 2003	%
State	\$ 6,142,313	46.8%	\$ 5,846,806	44.0%
Federal	\$ 6,774,921	51.6%	\$ 7,402,044	55.7%
Private	\$ 221,088	1.7%	\$ 47,558	0.4%
<b>TOTAL</b>	<b>\$ 13,138,322</b>	<b>100.0%</b>	<b>\$ 13,296,408</b>	<b>100.0%</b>

State funds went down approximately 5% since the previous fiscal year, with private funds also decreasing by almost 79% due to the expiration of the Robert Wood Johnson grant. Federal funding, however, increased by more than 9% (mainly for the National Family Caregiver Support Program), resulting in an overall increase of slightly more than 1%.

The following table shows state and federal funding allocations distributed to Area Agencies on Aging in FY 2003:

### EXECUTIVE OFFICE ON AGING STATE AND FEDERAL FUNDS ALLOCATED TO THE AREA AGENCIES ON AGING STATE FISCAL YEAR 2003

AREA AGENCY	STATE FUNDS	FEDERAL FUNDS	TOTAL
Kauai Agency on Elderly Affairs	\$ 580,584	\$ 546,191	\$ 1,126,775
Honolulu Elderly Affairs Division	\$ 2,946,860	\$ 3,443,753	\$ 6,390,613
Maui County Office on Aging	\$ 680,283	\$ 1,034,088	\$ 1,714,371
Hawaii County Office of Aging	\$ 646,578	\$ 1,028,903	\$ 1,675,481
<b>TOTAL</b>	<b>\$ 4,854,305</b>	<b>\$ 6,052,935</b>	<b>\$ 10,907,240</b>

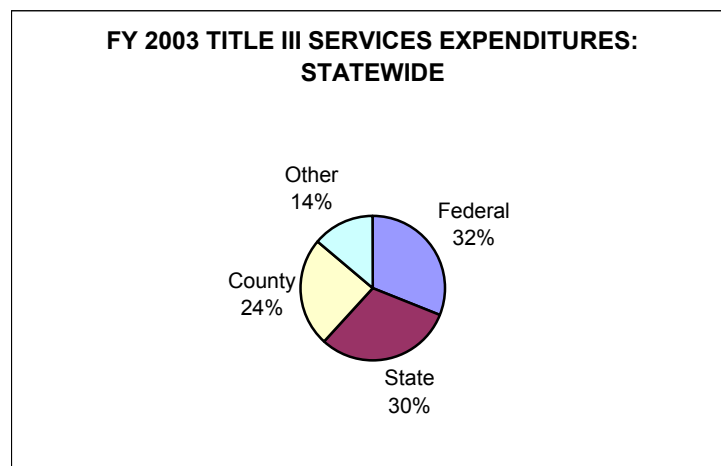
Total state funds allocated to area agencies on aging remained the same as last year's. Federal funds to AAAs increased from \$4,823,694 in 2002 to \$6,052,935 in 2003.

During FY 2003, the following Title III services were provided to older individuals, 60 years and over, statewide.

### FY 2003 TITLE III SERVICES PROFILE: STATEWIDE

Title III Services	Persons Served	Service Units
Personal Care	787	48,312
Homemaker	583	15,231
Chore	445	6,498
Home Delivered Meals	4,154	525,064
Adult Day Care	156	23,986
Case Management	1,922	26,675
Congregate Meals	4,856	381,809
Nutrition Counseling	168	170
Assisted Transportation	1,243	60,094
Transportation	4,108	169,277
Legal Assistance	1,028	5,510
Nutrition Education	17,019	1,569
Information and Assistance	7,801	23,227
Outreach	5,332	5,452

A total of \$16,290,547 was spent on Title III services. This is broken down as follows: federal\*(\$5,082,108), state\*\* (\$4,962,903), county (\$3,970,985), and other\*\*\*(\$2,274,551).



\* "Federal" includes Title III, USDA Reimbursement, and Other Federal

\*\* "State" refers to Kupuna Care expenditures

\*\*\* "Other" includes Program Income, Cost Share Income, In-Kind, and Other

## **THE POLICY ADVISORY BOARD FOR ELDER AFFAIRS**

Appointed by the Governor to advise the Executive Office on Aging, the volunteer Policy Advisory Board for Elderly Affairs (PABEA) contributed expertise and time, participated in sub-committees, and accomplished the following under PABEA chair Wayne Hikida.

It advocated policies and legislation that offered strategies to finance long term care and protect the rights and health of elders in their homes and care facilities.

It reviewed the proposed four-year *Hawaii State Plan on Aging (2004-2007)*, submitted to the U.S. Administration on Aging for continued funding of aging programs in Hawaii.

It raised funds and organized the annual recognition of Hawaii's outstanding older adults, with a proclamation signing by Governor Linda Lingle and luncheon program at Washington Place on May 30, 2003. This year's honorees were:

### **Albert Lederberger of Hawaii County**

Albert volunteered his time, expertise and compassion to retrain plantation workers and local youth when the Pahala Plantation closed. He is an active member of the Neighborhood Watch, his local senior center, RSVP and Volunteers in Mission, a group of volunteers from the mainland who come every year to help the community.

### **Elaine Sugai of Hawaii County**

Elaine gives back to her community in countless ways, serving as volunteer to various programs and organizations such as Project Dana, SagePLUS, Zonta Club, Hospice of Hilo, Pacific Tsunami Museum, Hilo Hongwanji Peanut Butter Ministry, Boys and Girls Club and RSVP.

### **Alice Morisako of Honolulu County**

Alice honors her Okinawan culture and heritage by volunteering her numerous skills and talents in the Hawaii United Okinawan Association, Ginowan Shijin Kai Club, Moanalua Senior Citizens Club, Moanalua Gardens Foundation, Moanalua Schools and Kaiser Medical Center.

### **George Lum of Honolulu County**

George volunteers at the Palolo Chinese Home and the Council of Community Churches of Honolulu. He is best known as a teacher and counselor in the SagePLUS program.



### **May Fujiwara of Maui County**

May is called a “volunteer’s volunteer.” She has devoted her retirement years to being a senior advocate through the Maui County Council on Aging, the Maui Long Term Care Partnership, and helps more than a dozen community projects.

### **George Fujiwara of Maui County**

George mirrors his wife May’s passion for volunteering time and talents in the community. He serves as a member of Na Kupuna ‘Ohana Serenaders, Salvation Army Lahaina Corps, Lahaina Seniors Gateball Club, Lahaina Hongwanji Mission Kyodan and RSVP.

### **Takeshi Fujita of Kauai County**

Takeshi leads many other volunteers through the Hui O Laka/Kokee Natural History Museum, Friends of Hanapepe Library, West Kauai Hongwanji Mission and Kauai Retired Teachers Association. In 2002, he was named a “Living Treasure” by the Honpa Hongwanji Mission of Hawaii.

### **Naoko Ogata of Kauai County**

Naoko is a vibrant volunteer in the Waimea Senior Center, Fukuoka Ken Jin Club, Waimea United Church of Christ, Kauai Veterans Memorial Hospital and RSVP.



**Governor Lingle with 2003 Honorees**

## HOW TO REACH THE HAWAII AGING NETWORK

### State Unit on Aging



"E Loa Ke Ola"  
May Life Be Long

**Executive Office on Aging (EOA)**  
250 South Hotel Street, Suite 406  
Honolulu, Hawaii 96813

**Internet:** [www2.hawaii.gov/eoa](http://www2.hawaii.gov/eoa)  
**Phone:** (808) 586-0100  
**Fax:** (808) 586-0185  
**Email:** [eoah@health.state.hi.us](mailto:eoah@health.state.hi.us)

### Area Agencies on Aging

The four Hawaii Area Agencies on Aging (AAAs or "triple As") are located in county government, with the Maui AAA also serving Kalawao County.



Hawaii County  
Office on Aging

#### **Hawaii County Office of Aging (HCOA)**

101 Aupuni Street, Suite 342  
Hilo, Hawaii 96720

**Phone:** (808) 961-8600  
**Fax:** (808) 961-8603  
**Email:** [hcoa@verizon.net](mailto:hcoa@verizon.net)



Elderly Affairs Division

#### **Elderly Affairs Division (EAD)**

715 South King Street, Suite 200  
Honolulu, Hawaii 96813

**Phone:** (808) 523-4361  
**Fax:** (808) 527-6895  
**Email:** [kmiyake@elderlyaffairs.com](mailto:kmiyake@elderlyaffairs.com)

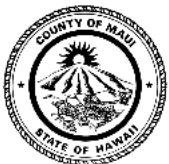


Kauai Agency  
on Elderly Affairs

#### **Kauai Agency on Elderly Affairs (KAEA)**

4444 Rice Street, Suite 105  
Lihue, Hawaii 96766

**Phone:** (808) 241-6400  
**Fax:** (808) 241-6409  
**Email:** [ktakahashi@kauaigov.com](mailto:ktakahashi@kauaigov.com)



Maui County Office on Aging

#### **Maui County Office on Aging (MCOA)**

200 S. High Street, 4th Floor  
Wailuku, Hawaii 96793

**Phone:** (808) 270-7774  
**Fax:** (808) 270-7935  
**Email:** [aging@co.maui.hi.us](mailto:aging@co.maui.hi.us)





*"E Ola Ke Ola"  
May Life Be Long*

Executive Office on Aging  
Department of Health  
250 S. Hotel Street, Room 406  
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Phone: (808) 586-0100  
Fax: (808) 586-0185  
Website: [www2.hawaii.gov/ea](http://www2.hawaii.gov/ea)